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CENTRAL INTELLIGENCE AGENCY  
INFORMATION REPORT

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25 YEAR RE-REVIEW

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COUNTRY Poland

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1. The psychiatric health service in Poland was one of the several special branches of the nationalized health service which was controlled by the Ministry of Health. Its organization was centralized and rested upon two governmental administrative levels: (See page 6 for Organizational Chart).

- a. The Ministry of Health with its departments and subordinate national institutions and organizations.
- b. The voivodship level represented by the department of health of each voivodship national council to which all mental hospitals, institutions, and mental consulting stations or dispensaries were directly subordinated.

There were no psychiatric dispensaries, hospitals, or wards on the county (powiat) level; mental patients received their first medical aid from the regional doctors, usually general practitioners.

2. The Mental Health Section (Wydział Zdrowia Psychicznego) in the Department of Treatment (Departament Lecznictwa) was the governmental administrative office within the Ministry of Health responsible for all problems related directly to mental health and the administration of all mental hospitals and psychiatric stations. The Department of Treatment and other departments in the Ministry of Health coordinated their activities with other ministries and central institutes such as the Ministry of Labor and Social Services and the Ministry of Higher Education and Science, depending on the type of action involved.

3. In matters concerning mental health the following were directly subordinated to the Ministry of Health:

- a. The State Psychoneurological Institute in Pruszkow. 1

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- b. The Main Consulting Station for Mental Health (Główna Poradnia Zdrowia Psychicznego) located in Warsaw at 37/39/41 Chelmska Street. This was a central psychiatric dispensary serving outpatients with mental and nervous disorders in Warsaw. It kept records on and took care of people who were discharged from mental hospitals and clinics. It also controlled about 20 voivodship outpatient consulting stations (wojewódzka poradnia zdrowia psychicznego) which were located mostly in voivodship seats (wojewódzkie miasto).
  - b. The National Psychiatric Specialist (Krajowy Specjalista Psychiatrii) who was a consultant on psychiatry for the Ministry of Health. All voivodship psychiatric specialists were subordinated to him in medical matters. Professor Dr. Eugeniusz Wilczkowski from Lodz held this position in 1953/54.
  - d. The State Medical Publications Establishment (Państwowy Zakład Wydawnictw Lekarskich) which published, among other medical publications, a bimonthly periodical called, Neurologia Neurochirurgia i Psychiatria Polska, (Polish Neurology Neuro-Surgery and Psychiatry).
  - e. The Polish Psychiatric Society (Polskie Towarzystwo Psychiatrii), a semi-independent scientific society composed of psychiatrists, some neurologists, and psychologists. Branches of the Polish Psychiatric Society organized lectures and conferences throughout the nation. Every year the society organized an annual convention which usually lasted two days. The program of the convention always included lectures and reports by leading psychiatrists on developments and results in research in psychiatry as well as discussions on different current problems pertaining to psychiatry. The last annual convention was held in Branice (N 50-21, E 17-49) in the fall of 1953.
  - f. The psychiatric clinics of the ten existing medical academies were subordinate to the Ministry of Higher Education and Science in such matters as education and training of students and scientific research. However, the administrative and strictly professional medical matters in the psychiatric clinics were under the direct supervision of the Ministry of Health. Some of the psychiatric clinics of the medical academies were located within local mental hospitals.
4. The department of health of each voivodship national council was in charge of the psychiatric medical service in its voivodship. The following institutions were subordinated to it:
- a. The voivodship psychiatric specialist (wojewódzki specjalista psychiatrii), usually one of the senior psychiatrists in the voivodship area who acted as a consultant in psychiatry and instructor for the Department of Health, in addition to his normal position as a professor at a medical academy or director of a psychiatric clinic. He inspected every mental hospital, clinic, and dispensary in his voivodship each month and submitted reports to the department as well as to the National Psychiatric Specialist at the Ministry of Health.
  - b. State hospital for nervous and mental diseases (państwowy szpital dla nerwowo i psychicznie chorych); there was usually one for each voivodship area. Some of these voivodship mental hospitals sometimes served an area in a neighboring voivodship.

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- c. The central voivodship consulting station for Mental Health (centralna wojewodzka poradnia Zdrowia Psychicznego), normally located in the voivodship seat.

Each of these stations had a dispensary for those mental outpatients who were directed to it and kept records of all mental patients discharged from mental hospitals and psychiatric clinics in the voivodship area. The social psychiatric assistants employed by the central voivodship consulting station also visited the discharged mental patients, assisted them in finding employment, housing, etc., and arranged for periodic checks of their health. The station and mental dispensary cooperated with mental hospitals and clinics; this was in most areas facilitated by the fact that some of the psychiatrists were employed in both institutions. Source stated that the psychiatrists employed at the main and voivodship mental dispensaries tried in most cases to treat the outpatients themselves instead of sending them to the mental hospitals; however, even in such cases as slight schizophrenia, the treatment usually did not give any results and the outpatients had to be sent to the hospital, often in worse condition than when they had applied for treatment.

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5. There were no mental dispensaries or mental hospitals or wards below the administrative voivodship level up to May 1954. [redacted] it was planned to increase the number of consulting mental stations and dispensaries in Poland. It was suggested that some of the mental dispensaries should have small wards with a few beds for observation cases.

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[redacted] a lack of personnel and funds available for this purpose. Usually the mental patients themselves applied or were directed by relatives to the nearest regional medical doctor (lekarz rejonowy) who was normally a general practitioner. The regional medical doctor directed the patients to the Central Voivodship Consulting Station for Mental Health where they were examined and treated as outpatients or sent to a mental hospital or clinic. However, in severe cases when hospital treatment was immediately necessary, the regional doctor could send the mental patients directly to the mental hospital. The patients discharged from mental hospitals after successful treatment were usually sent home; the Central Voivodship Consulting Station for mental health was informed and received in each case a short history of the patient's illness.

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6. [redacted] mental hospitals and institutions in the following locations in Poland, known to him mostly from contacts with other psychiatrists and from hearsay:

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a. State Hospitals for Nervous and Mental Disorders:

Drewnica (N 52-19, E 21-07) about 500 beds.  
 Warta (N 51-42, E 18-38) [redacted]  
 Rybnik (N 50-07, E 18-32) [redacted]  
 Kobierzyn (N 50-01, E 19-54) about 1,400 beds.  
 Obrzyce (Obrawalde) (N 52-26, E 15-35) about 1,000 beds.  
 Dziekanowa near Gniezno (N 52-22, E 13-76) about 1,200 beds.  
 Kocborowo near Tczew (N 54-06, E 18-48) about 1,500 beds.  
 Choroszcz near Bialystok (N 53-09, E 22-59) about 1,000 beds.  
 Kielce (N 50-50, E 20-40) (a ward attached to the general hospital) about 60 beds.  
 Gostynin (N 52-26, E 19-29) about 1,000 beds.  
 Branice (N 50-12, E 17-49) about 800 beds.  
 Pruszkow (N 52-10, E 20-50) about 1,100 beds. 2

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Kochanowka (near Lodz) about 1,000 beds. <sup>2</sup>  
 Lubliniec (N 50-40, E 18-41) about 1,200 beds. <sup>2</sup>  
 Abramowice (near Lublin) [ ]

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b. Psychiatric Clinics of the Medical Academies:

Wroclaw	400 beds.		
Poznan	about 100 beds.	[ ]	25X1
Gdansk			
Krakow	about 150 beds.		
Bialystok	organization not yet completed	[ ]	25X1
			25X1
Szczecin	organization not yet completed	[ ]	25X1
Pruszkow <sup>3</sup> (near Warsaw)	Number of beds are included in those listed for the state hospitals at these locations (para 6a. above) since these clinics were in those hospitals.	[ ]	25X1
Kochanowka (near Lodz)			
Lubliniec (near Bytom)			
Abramowice (near Lublin)			

c. Institutions for Chronic Mental Disorders [ ]

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Stronie Slaskie (Probably Seitenberg near the Czechoslovakian frontier) about 1500 beds.

Gorzow (N 52-44, E 15-14) about 300 beds.

Frombork (N 54-22, E 19-41) [ ]

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Chelm Lubelski (N 51-08, E 23-20) [ ]

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[ ] it existed in 1939.

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d. State Sanatoriums for Nervous Disorders (Panstwowe Sanatorjum dla Nerwowo Chorych):

Koscian	(N 52-06, E 16-38)	about 600 beds.
Woniesco	(N 52-01, E 16-41)	subordinated to Koscian, about 60 beds.

e. The State Psychoneurological Institute in Pruszkow - about 130 beds.

7. [ ] the mental hospitals and institutions in Poland were not evenly distributed over the country; this was most evident in the southern and eastern parts of Poland. The number of dispensaries for mental outpatients was also insufficient; as was the number of psychiatric specialists and auxiliary medical personnel, especially in the industrialized areas. General conditions in mental hospitals were poorer than in other hospitals. There was a lack of beds and other equipment. The budget for the upkeep of mental hospitals was about 50% lower than that of other hospitals.

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8. Scientific research on psychiatry was conducted mainly by the State Psychoneurological Institute and to some extent by individual psychiatrists such as the professors and senior assistants in the psychiatric clinics of the medical academies. Most of the themes for research were dictated by the Ministry of Health in its yearly plans; some were selected by the individuals but all had to be conducted according to the Pavlov theory, which limited their

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SCOPE

scope. Reports on scientific research conducted according to the yearly plan were examined by the Scientific Council (Rada Naukowa) at the Ministry of Health and by the Psychoneurological Institute. Those conducted at the psychiatric clinics were examined by evaluation commissions at the medical academies. Some of the evaluations of scientific research in psychiatry were published in a periodical called Neurologia Neurochirurgia i Psychiatria Polska.

1. [REDACTED]
2. [REDACTED] Comment: Psychiatric clinics of the medical academies were located within these State Hospitals for Nervous and Mental Disorders.
3. [REDACTED]

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